

Learning Bridge Charter School

Covid Mitigation Plan

March 2022

IN CASE OF COVID-19 SYMPTOMS: Reporting Timeline

If an employee has been around an individual who is showing symptoms of COVID-19 or has tested positive:

- Employers should record the date of exposure and determine if there was close contact.
- If there was not close contact between the employee and individual, the employee can continue to work and should self-monitor for 10 days.
- If the employee was in close contact with the individual, the employee should be advised to return home and self-monitor for 10 days while seeking a diagnosis from a healthcare provider.

Close contact is established if the employee was within 6 feet of the infected or symptomatic person or was exposed for 15 minutes without wearing PPE approved by NIOSH or CDC. If patients had no close contact with an employee with a suspected exposure, symptoms or positive test for COVID-19, patient notification is not required. Only inform individuals who have had close contact.

Employee reports symptoms

If an employee is experiencing COVID-19 symptoms, employers should:

- Record the date of the report and symptoms.
- Advise employees to self-monitor at home for 10 days, to contact a health care provider for testing and to notify the practice of the results.

Positive COVID-19 results

If an employee tests positive for COVID-19, employers should:

- Notify the local health department and follow its instructions.
- Advise the employee to remain home, to contact a health care provider and to notify the practice of the results.

Learning Bridge is not going to require universal masking but recommends masking. In case a student or staff member shows COVID-19 symptoms, Learning Bridge has a plan in place, based on the best information from the CDC, local health officials, & Department of Health and Human Services regarding *Emergency Directive 052*.

**This plan is likely to change as more information becomes available and as we continue to follow the latest guidance of public health officials. We will notify you when we update our plans.*

HOW Learning Bridge WILL RESPOND IF SOMEONE HAS COVID-19 SYMPTOMS:

Learning Bridge Charter School will continue to focus on reducing the risk of COVID-19 for all students. The introduction of several COVID-19 variants of concern, including the highly transmissible Omicron variant and the Delta variant, changed the landscape of the 2021-22 school year. Future variants with increased transmissibility have the potential for exponential growth in outbreaks especially in communities and settings with low vaccination rates and limited mask use.

Learning Bridge Charter School will expect and plan for occurrences of COVID-19 within school communities. DHHS supports full in-person learning with the proper prevention and mitigation measures in place, consistent with CDC's Guidance for COVID-19 Prevention in K-12.

Schools and the American Academy of Pediatrics (AAP) COVID-19 Guidance for Safe Schools.

This document is intended to provide guidance regarding important prevention measures recommended to be in place for routine school opening plans. As noted above, Learning Bridge includes detailed outbreak mitigation strategies that will be put into place should a school experience an outbreak. This document will continue to be updated as more is learned about transmission within schools and to align with any further guidance produced by CDC and AAP.

Notifications about Cases and Covid Testing:

- Learning Bridge will alert parents to where they can receive free covid-19 testing, for students and staff. Regular testing means that testing is offered to everyone on a routine basis, even if they don't have symptoms of COVID-19.
- Learning Bridge espouses testing for staff, students and parents, along with COVID-19 vaccination, proper masking, and physical distancing, helps protect students, staff, and family members. It also protects those who are not up to date on their COVID-19 vaccines or are otherwise at risk for getting seriously sick from COVID-19.
- COVID-19 tests are offered in the White Pine community and are free, quick, and easy.
- Learning Bridge feels COVID-19 testing programs can help keep students in the classroom and doing the school activities they enjoy, safely.

As we work to keep students and staff safe during this pandemic, we will share as much information as possible with you, while still following legal and ethical privacy rules.

As we often do each year we will see staff/students with allergies and illnesses like strep and bronchitis which can be similar to Covid -19 systems. As appropriate, we will send them home, and we encourage them to get tested for COVID-19 if necessary.

Positive for Covid/Reporting Covid:

According to the latest guidance from the Centers for Disease Control, anyone who tests positive for COVID-19 should:

- isolate for 5 days.
- wear a mask around others for five additional days.
- You must be fever free for at least 24 hours without the use of fever reducing medications
- leave your house only if you have no symptoms or your symptoms are resolving;
- tell a healthcare provider about your positive test result; and,
- tell close contacts that they may have been exposed to COVID-19. You can begin spreading the virus in 48 hours before you have any symptoms or test positive.

You also needn't repeat a test once you're feeling better. The CDC says that if you have tested positive for COVID-19 within the past three months, recovered and have no new symptoms, then you do not need to re-test, since tests, depending on the type, can stay positive for weeks or months. "There is absolutely no need to test before leaving self-isolation.

The law requires that school principals or designee report to the local health department anyone within in a school who they have reason to suspect has a reportable communicable disease:

1.COVID-19 is a reportable communicable disease.

2 For schools, this means that if a student or staff member tests positive for COVID-19, or is suspected to be positive for COVID-19, the principal of the school Dr. Jerri-Lynn Williams-Harper 775-293-8009 must notify the local health director or designee.

While privacy laws keep us from sharing each of these cases with you, please take precautions as if everyone has COVID-19, including you and your family. Please use the list of symptoms we will give to you to screen before coming to school, and please stay home if you know you or your child have been exposed to COVID-19.

For family members, if we find out your child was directly in contact at school with someone who tested positive for COVID-19 or someone whose medical provider diagnosed them with a presumed case of COVID-19, we will contact you.

For staff members, the same is true. If we find out you were directly in contact at work with someone who tested positive for COVID-19 or someone whose medical provider diagnosed them with a presumed case of COVID-19, we will contact you. ***We will ask that students who are directly exposed monitor symptoms for at least 10 days and stay home if any symptoms develop.***

Assessing Symptoms:

The school will use judgment to evaluate each individual's symptoms. Even if a student or staff member's fever does not reach the American Academy of Pediatrics' recommendation of 100.4 F, the school might send the student or staff member home after considering all symptoms.

Safety Precautions with or without Covid-19/Community Spread

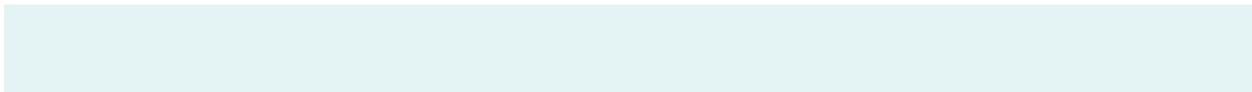
What Prevention Steps Should You Take Based on Your COVID-19 Community Level?

Low	Medium	High
<ul style="list-style-type: none"> • Stay up to date with COVID-19 vaccines • Get tested if you have symptoms 	<ul style="list-style-type: none"> • If you are at high risk for severe illness, talk to your healthcare provider about whether you need to wear a mask and take other precautions • Stay up to date with COVID-19 vaccines • Get tested if you have symptoms 	<ul style="list-style-type: none"> • Wear a mask indoors in public • Stay up to date with COVID-19 vaccines • Get tested if you have symptoms • Additional precautions may be needed for people at high risk for severe illness

Learning Bridge feels people may choose to mask at any time. People with symptoms, a positive test, or exposure to someone with COVID-19 must wear a mask. People who test positive for COVID-19 or those who have symptoms for COVID-19 and are waiting test results must go home and isolate themselves. You must isolate yourself regardless of your vaccination status. Do not go to work, school, or public areas. Avoid using public transportation, ridesharing, or taxis. Ask others to do your shopping or use a grocery delivery service.

Separate as much as possible from others at home by staying in a specific room away from other people and using a separate bathroom if available. Wear a well-fitting mask when you need to be around others. You should stay home except to get medical care. Call before you go to the doctor. Tell your health care provider you have COVID-19 or are being evaluated for COVID-19.

If you are immunocompromised or high risk for severe disease, learn more about [how to protect yourself](#).



Every school will use CDC-recommended personal protective equipment (PPE) when working with a student or staff member with COVID-19 symptoms and will try to keep the person with symptoms separated from everyone else until they can carefully leave the school.

Case Reporting and Contact Tracing:

Any instances of students or staff having tested positive for COVID-19 must be put in isolation and reported to the appropriate public health authority immediately. In addition, any increase or clusters of students or staff reporting symptoms consistent with COVID-19 in the absence of being tested, should also be put on isolation and reported to the appropriate public health authority immediately:

- Southern Nevada Health District (SNHD): (702) 759-0925 (24 hours), or schoolcovid@snhd.org
- Nevada Division of Public and Behavioral Health (DPBH): (775) 684-5911 (M-F 8:00 AM to 5:00 PM); (775) 400- 0333 (after hours), Fax (775) 684-5999, or dpbhschoolcases@health.nv.gov (All other counties) Any COVID-19 outbreak declarations must be reported to your ELY local public health authority immediately.

Guidelines/Medical Care:

The school will discuss home guidelines and recommend to the student's family or staff member, to be tested for Covid-19 including information about the rules for returning to school. The school will recommend the person with symptoms follow up with a licensed medical provider or the health department.

Cleaning and Ventilation:

Learning Bridge custodial maintenance staff will block off areas the student or staff member has been until they can clean and disinfect them. Continue to routinely clean and disinfect surfaces throughout the day. The school also uses an Aquatronic Cannon disinfectant machine which sanitizes each classroom with a sanitizing mist to keep classrooms disinfected. Learning Bridge is a brand-new school which opened in September 2020. Our school has a proper ventilation system to ensure the air is fresh for students and staff safety daily.

Improving ventilation in Learning Bridge is an important COVID-19 prevention strategy that can reduce the number of virus particles in the air. Along with other preventive strategies, including wearing a well-fitting facemask, bringing fresh outdoor air into a building helps keep virus particles from concentrating inside. If necessary, we will open multiple doors and windows, use child-safe fans to increase the effectiveness of open windows.

More information can be found here: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/ventilation.html> During transportation, open or crack windows in buses and other forms of transportation, if doing so does not pose a safety risk. Keeping windows open a few inches improves air circulation.

If a Student or Staff Member Gets a COVID-19 Diagnosis:

If a student or staff member has a positive COVID-19 test or a healthcare provider diagnoses presumptive COVID-19, we will follow these guidelines:

- If your child has been in direct contact with someone who tested positive for COVID-19 or whose medical provider diagnosed them with a presumed case of COVID-19, we will contact you.

If COVID-19 Spreads in the Community:

If your child has been in direct contact with someone who tested positive for COVID-19 or whose medical provider diagnosed them with a presumed case of COVID-19, you will be informed.

If there is community spread of COVID-19 within a school, we will work directly with local health department officials to complete contact tracing and inform those having close contact with a sick student or staff member.

RETURNING TO SCHOOL AFTER ILLNESS

If the School Sends a Student or Staff Member Home:

If a school sends someone home for COVID-19 like symptoms, we will use these guidelines to decide about the student or staff member's return to school:

- Must be fever free for at least 24 hours without the assistance of Tylenol, Motrin, Advil, or any fever reducing medication
- Must have an improvement in symptoms
- Will be asked to stay at home at least five days or the recommendation of the local CDC or licensed Health official after symptoms first appeared
- May be asked to bring medical clearance to return to school signed by their licensed health care provider

If a Student or Staff Member Gets Diagnosed with COVID-19:

If a student or staff member has a positive COVID-19 test or gets diagnosis of presumptive COVID-19 from their health care provider, we will follow these guidelines to decide about return to school:

- Must be fever free a minimum of at least 24 hours without the use of fever reducing medication such as Tylenol, Motrin, Advil, or any fever reducing medication
- Must have improvement in symptoms
- Must stay home at least five days after symptoms first appear and mask for an additional 5 days.

IN CASE OF COVID-19 SYMPTOMS

In case a student or staff member shows COVID-19 symptoms, Learning Bridge has a plan in place, based on the best information from the CDC, local health officials, & DHHS. **This plan is likely to change as more information becomes available and as we continue to follow the latest guidance of public health officials. We will notify you when we update our plans.*

HOW Learning Bridge WILL RESPOND IF SOMEONE HAS COVID-19 SYMPTOMS

Notifications about Cases:

As we work to keep students and staff safe during this pandemic, we will share as much information as possible with you, while still following legal and ethical privacy rules.

As we often do each year, we will see staff/students with allergies and illnesses like strep and bronchitis. As appropriate, we will send them home, and we encourage them to get tested for COVID-19 if necessary.

While privacy laws keep us from sharing each of these cases with you, please take precautions as if everyone has COVID-19, including you and your family. Please use

the list of symptoms we will give to you to screen before coming to school, and please stay home if you know you or your child have been exposed to COVID-19.

For family members, if we find out your child was directly in contact at school with someone who tested positive for COVID-19 or someone whose medical provider diagnosed them with a presumed case of COVID-19, we will contact you.

For staff members, the same is true. If we find out you were directly in contact at work with someone who tested positive for COVID-19 or someone whose medical provider diagnosed them with a presumed case of COVID-19, we will contact you.

Assessing Symptoms:

The school will use their judgment to evaluate each individual's symptoms. Even if a student or staff member's fever does not reach the American Academy of Pediatrics' recommendation of 100.4 F, the nurse might send the student or staff member home after considering all symptoms.

Safety Precautions:

Learning Bridge will use CDC-recommended personal protective equipment (PPE) masks and gloves when working with a student or staff member with COVID-19 symptoms, and the school will try to keep the person with symptoms separated from everyone else until they can carefully leave the school. Learning Bridge has a supply of masks should students or the public request a mask.

Guidelines for Handwashing/Respiratory Etiquette:

Students will be encouraged to wash with soap and sanitize their hands often in school as well as home. Hand Washing and Respiratory Etiquette People should practice

handwashing and respiratory etiquette (covering coughs and sneezes) to keep from getting and spreading infectious illnesses, including COVID-19. Schools can monitor and reinforce these behaviors and provide adequate hand washing supplies.

- Teach and reinforce handwashing with soap and water for at least 20 seconds.
- Remind everyone in the facility to wash hands frequently and assist young children with handwashing.
- If handwashing is not possible, use hand sanitizer containing at least 60% alcohol (for teachers, staff, and older students who can safely use hand sanitizer). Hand sanitizers should be stored up, away, and out of sight of young children and should be used only with adult supervision for children under 6 years of age.
- Schools should avoid or minimize shared items between students and staff. Shared items must be disinfected frequently. More information can be found here:
<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/cleandisinfect-hygiene.html>

Medical Care:

The school will recommend the person with symptoms follow up with a licensed medical provider or the health department.

Quarantine On January 4, 2022, CDC updated COVID-19 isolation and quarantine recommendations with shorter isolation (for asymptomatic and mildly ill people) and quarantine periods of 5 days to focus on the period when a person is most infectious, followed by continued masking. On February 1, 2022, DHHS modified the exposure definition as follows:

Masked contact in a K-12 setting is no longer considered an exposure regardless of distancing. The focus for contact tracing should be on identifying high-risk, indoor,

unmasked exposures most likely to result in transmission. Schools that have implemented universal masking among staff and students will continue.

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Cohorts:

Schools should consider the development of stable lunch cohorts (table groups, lunch bunches and other group situations). If a case occurs within an indoor unmasked cohort, the entire cohort group may be considered exposed (e.g., an assigned lunch or extracurricular group may all be considered exposed if a positive case occurs within the group). Stable cohorts significantly reduce the burden of contact tracing.

Schools that have implemented universal masking only among staff, will need to assess each exposure based upon masked status. For example, if a COVID-19 positive staff member that was appropriately wearing a mask was in contact with another masked staff member, that would no longer be considered an exposure. However, if that positive staff member was appropriately masked and had indoor contact with an unmasked student, that would be considered an exposure and contact tracing and quarantine procedures must be followed.

The CDC close contact definition is below, which can be superseded by the updated DHHS exposure definition (as outlined above) for those that meet the criteria to do so:

WHO NEEDS TO QUARANTINE:

People who have come into close contact with someone with COVID-19 and are in one of the following groups need to quarantine:

- People who are ages 18 and older and completed the primary series of recommended vaccines but have not received a recommended booster shot when eligible.
- People who are 18 years and older who received the single-dose Johnson & Johnson vaccine (completing the primary series) over 2 months ago and have not received a recommended booster shot.

- People who are not vaccinated or have not completed a primary vaccine series.

Quarantine starts the day of last known contact to a positive individual (day 0) and lasts for five days. For example, if the last known exposure was Friday (day 0), the student or staff could return to school after five days, or on Thursday (day 6) if no symptoms have developed. Upon return, the student or staff must wear a well-fitting mask for a minimum of five additional days within schools that have not implemented universal masking or continue wearing the mask in schools that require universal masking.

More information: <https://www.cdc.gov/coronavirus/2019-ncov/community/schoolschildcare/k-12-contact-tracing/about-quarantine.html>

WHO DOES NOT NEED TO QUARANTINE:

Close Contact Through Proximity and Duration of Exposure: Someone who was within 6 feet of an infected person (laboratory-confirmed or a clinically compatible illness) for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes). An infected person can spread SARS-CoV-2 starting from 2 days before they have any symptoms (or, for asymptomatic patients, 2 days before the positive specimen collection date), until they meet criteria for discontinuing home isolation.

Exception: In the K–12 indoor classroom setting or a structured outdoor setting where mask use can be observed (i.e., holding class outdoors with educator supervision), the close contact definition excludes students who were between 3 to 6 feet of an infected student (laboratory-confirmed or a clinically compatible illness) if both the infected student and the exposed student(s) correctly and consistently wore well-fitting masks the entire time.

Carson City, Nevada 89706 775-684-4200 • Fax 775-687-7570 • dpbh.nv.gov Created 8.4.2021, updated 2.17.2022. People who have come into close contact with someone with COVID-19 and are in one of the following groups do not need to quarantine:

- Age 18 or older and have received all recommended vaccine doses, including boosters and additional primary shots for some immunocompromised people.
- Students 12-17 years old who have completed their primary vaccine series but have not yet received all eligible boosters. This is to allow time for students to catch up with the latest recommendations and to minimize disruption to in-person learning.
- Age 5-11 years and completed the primary series of COVID-19 vaccines. • Anyone who has had confirmed COVID-19 within the last 90 days (who tested positive using a viral test, meaning a positive PCR or an antigen test. Antibody tests do not count).
- If staff or students are participating in a school-sponsored Test to Stay Program, these individuals should wear a well-fitting mask around others for 10 days from the date of the last close contact with someone with COVID-19 (the date of last close contact is considered day 0). **Learning Bridge** wants students and staff to be tested at least 5 days after they last had close contact with someone with COVID-19 unless they had confirmed COVID-19 in the last 90 days and subsequently recovered. If they test positive or develop COVID-19 symptoms, they should follow the isolation instructions below.

Cleaning:

Learning Bridge maintenance staff will block off areas the student or staff member has been until they can clean and disinfect them. Continue to routinely clean and disinfect surfaces throughout the day.

Learning Bridge directs that if a Student or Staff Member Gets a COVID-19 Diagnosis: Isolation and Exclusion

1. Must be excluded from the school or workplace for at least five days.
2. May return to work or school after five days* of isolation if ALL of the following are true:
 1. The student/employee is asymptomatic, or symptoms are resolving.
 2. Any fever has resolved (i.e., it has been at least 24 hours of no fever without the use of fever-reducing medications).
 3. [CDC Guidance on Quarantine and Isolation](#), provides information pursuant to which Day 0 is either the date of onset of symptoms or, for an asymptomatic individual, the date of specimen collection for the positive COVID-19 test.

Contract Tracing: Universal case investigation and contact tracing are not recommended for COVID-19. Learning Bridge will continue to report covid cases as necessary and follow local health authority guidelines.

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- Learning Bridge will notify our school communities when we are aware of COVID-19 circulating within our school and that potential exposures may have occurred. This allows people to make decisions for themselves and their loved ones since everyone's circumstances differ.
- If the positives come from a core group other within that group will be notified. Learning Bridge has a responsibility to communicate that information when the potential exposure is known so that people can make their own decisions based on individual and family risk factors. When a Learning Bridge is aware of a positive case or a known exposure, isolation and quarantine need to be upheld.
- Individuals can take a self-guided survey that walks through the most important aspects of disease investigation and directs them to appropriate resources, such as testing and treatment. It will help identify an infectious period and who they may have exposed, as well as assist with notification of contacts. In addition, the hotline will also do the same thing but with a live person to talk with: 1-800-401-0946 (7 days a week from 7am-8pm)
 - Health department jurisdictions should prioritize specific settings and groups at increased risk.
 - Case investigation and contact tracing are separate processes with distinct benefits and goals; decisions to initiate either should be made separately.
 - Investigations should focus on COVID-19 cases and close contacts with onsets and exposures in the previous 5 days for those settings and groups at increased risk.
 - Local health departments will consult with schools, businesses, and organizations that provide essential services to help them implement appropriate COVID-19 prevention measures and support broad-based efforts to notify people of a potential exposure.
 - Local health departments will support public education to encourage people with COVID-19 to [isolate](#) and [inform close contacts](#) about their potential exposure so close contacts can [quarantine](#), get [tested](#), [wear well-fitting masks](#), [take travel precautions](#), and [seek treatment](#) as appropriate.

- Health departments should offer COVID-19 [vaccinations](#) and other proven prevention strategies as part of their case investigation and contact tracing activities.
- Health departments have the authority to determine how case investigation and contact tracing should be implemented locally in response to each jurisdiction's needs, context, priorities, and resources.

If a student or staff member has a positive COVID-19 test or a healthcare provider diagnoses presumptive COVID-19, we will follow these guidelines:

Students, teachers, and staff who have symptoms of infectious illness, such as influenza or COVID-19, should stay home. Staying home when sick with COVID-19 is essential to keep COVID-19 infections out of schools and prevent spread to others. Schools should allow flexible, non-punitive, and supportive paid sick leave policies and practices that encourage sick workers to stay home without fear of retaliation, loss of pay, or loss of employment level and provide excused absences for students who are sick.

Learning Bridge will ensure that workers are aware of and understand these policies. Schools should educate teachers, staff, and families about when they and their children should stay home and when they can return to school. During the COVID-19 pandemic it is essential that parents keep children home if they are showing signs and symptoms of COVID-19 and get them tested.

Schools should ensure parents know how to report excused absences when their child has COVID-19 symptoms and/or a COVID-19 exposure:

- If your child has been in direct contact with someone who tested positive for COVID-19 or whose medical provider diagnosed them with a presumed case of COVID-19, we will contact you. Learning Bridge will work directly with local health department officials to complete contact tracing and inform those having close contact with a sick student or staff member. Parents will be notified if there is community spread or a school outbreak through the school under the tutelage of the Ely health department.

PROMOTING VACCINATION:

Learning Bridge understands that achieving high levels of vaccination are important to prevent community, teacher, staff and household member spread of Covid 19.

According to CDC parents, staff and students will be encouraged to receive vaccinations for themselves and their children who attend Learning Bridge Charter School. A growing body of evidence suggests that people who are fully vaccinated and boosted against Covid-19 are less likely to have a symptomatic infection or transmit Covid-19 compared to others who are not fully vaccinated.

CDC continues to reinforce that vaccination is still the leading public health prevention strategy to manage the COVID-19 pandemic. COVID-19 vaccines are safe and effective at preventing COVID-19, especially severe illness and death. The CDC provides resources to assist schools with promoting vaccine:

<https://www.cdc.gov/vaccines/covid19/planning/school-located-clinics/how-schools-can-support.html> Individuals who are 5 years of age and older are eligible for COVID-19 vaccination. At this time, only the Pfizer-BioNTech COVID-19 vaccine is authorized and recommended for children aged 5-11.

Learning Bridge suggests and promotes vaccinations among teachers, staff, families, and eligible students by providing information about COVID-19 vaccination, encouraging vaccine trust and confidence, and establishing supportive policies and practices that make getting vaccinated as easy and convenient as possible.

Additionally, for some immunocompromised children aged 5-11, CDC now recommends an additional dose of the Pfizer-BioNTech COVID-19 vaccine to complete the primary series, a total of three doses. Also, the CDC now recommends booster shots 5 months after the completion of the primary series of Moderna and Pfizer BioNTech COVID-19 vaccines for those aged 12 and older. Vaccine recommendations are rapidly changing, the latest CDC guidelines can be access here: <https://www.cdc.gov/coronavirus/2019->

[ncov/vaccines/stay-up-to-date.html](https://www.nvcovidfighter.org/) Vaccine appointments can be scheduled online at: <https://www.nvcovidfighter.org/> or by phone at 800-401-0946.

MASK USE:

Learning Bridge is not going to require universal masking but recommends it.

CDC is still advising people, including schoolchildren, to wear masks where the risk of COVID-19 is high. The new recommendations do not change the requirement to wear masks on public transportation and indoors in airports, train stations and bus stations. Learning Bridge will have students wear masks on field trips when traveling in cars or on buses. Masks are no longer required on school buses.

But with protection from immunity rising — both from vaccination and infection — the overall risk of severe disease is now generally lower, the CDC said.

Learning Bridge feels "Anybody is certainly welcome to wear a mask at any time if they feel safer wearing a mask," Anyone can go to the CDC website, find out the volume of disease in their community and make that decision. "Learning Bridge along with the CDC recommends universal indoor masking for all teachers, staff, students, and visitors to K-12 schools, regardless of vaccination status. The American Academy of Pediatrics (AAP), Nevada Chapter advises that in most cases, a child who is unable to wear a mask safely for medical reasons should not attend school in-person, especially in an outbreak setting or in a community with substantial or high transmission.

Full guidance on mask exemptions from AAP, Nevada Chapter can 1 CDC,

K-12 Guidance: <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/k-12-guidance.html> 2 American Academy of Pediatrics, COVID-19 Guidance

for Safe Schools: <https://services.aap.org/en/pages/2019-novel-coronavirus-covid-19-infections/clinical-guidance/covid-19-planning-considerations-return-to-in-person-education-in-schools/> 3 <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/effectiveness/why-measure-effectiveness/breakthrough-cases.html>

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Created 8.4.2021, <https://nvhealthresponse.nv.gov/wp-content/uploads/2021/12/Mask-Exemptions-in-Children-andAdolescents.pdf>

If individuals wear face masks properly to cover their nose and mouth, they are effective in helping prevent the spread of COVID-19. Masks should meet CDC recommendations in terms of use and quality. In an effort to reduce the overall burden of contact tracing on K-12 schools while ensuring high-risk exposures are prioritized, DHHS will no longer consider masked contact in a K-12 setting as an exposure regardless of distancing. This pivot allows schools to focus resources on identifying high-risk, indoor, unmasked exposures most likely to result in transmission. More details can be found in the quarantine section below. Additionally, schools can only participate in a Test to Stay Program if the school has universal masking among staff and students as described above. When teachers, staff, and students consistently and correctly wear a facemask, they protect others as well as themselves. Consistent and correct facemask use is especially important indoors and in crowded settings when physical distancing cannot be maintained.

Face Cover Directive 052:

Pursuant to Directive 052, use of face coverings is not required within the school setting, unless the school is experiencing an outbreak of COVID-19.

Schools that are experiencing an outbreak must implement appropriate mitigation measures, including universal masking for the duration of the outbreak. Masking must also occur for anyone who has COVID-19 and is following the shortened isolation and quarantine periods, which allow for 5 days of masking after 5 days of either isolation or quarantine as outlined later in the document. Use of face coverings is required on public transportation pursuant to the CDC order issued on January 29, 2021. This includes all passengers and all personnel operating public transportation vehicles, which includes school buses.

Mitigation for School Outbreaks:

Learning Bridge will mitigate outbreak with the following will use the outbreak definition provided by the Nevada Department of Health and Human Services “School Related Cluster and Outbreak Reporting”. CSTE Definitions include:

- Cluster- A k-12 school associated cluster is defined as an education institution that has been found by their local health department to have:
 - Multiple cases comprising at least 10% of students, teachers, or staff, within a specified core group OR
 - At least 3 cases within a specified core group meeting criteria for a probable or confirmed school associated COVID-19 case with symptoms onset or positive test results within 14 days of each other, AND no likely known epidemiologic link to a case outside of the school setting.
- Outbreak- A K-12 outbreak is defined as an educational institution that has been found by school leadership or the local health department to have
 - Multiple cases comprising at least 10% of the students or staff within a specified core group OR
 - At least three cases within a specified core group meeting criteria for a probable or confirmed school associated COVID-19 case with symptom onset or positive test result within 14 days of each other; who were not identified as close contacts of each other in another setting outside of the school; AND
 - Epidemiologically linked in the school setting or a school-sanctioned co-curricular activity.

Learning Bridge has a robust tracking system which tracks all symptomatic students, all testing results, as well as core groups of students. By tracking core students' groups school administration, in consultation with the school nurse will monitor for outbreaks

based on the above definitions. The school administration, in consultation with the school nurse will declare outbreaks when those definitions have been met.

Outbreak Monitoring

Upon outbreak declaration an email, be sent to the SPCSA, DHHS, and the families, staff, and board of Learning Bridge. The email will include the required outbreak mitigation measures:

- Universal masking
- Quarantine and Isolation according to CDC guidelines and outlined in this plan
- To the best of the school ability maintain 3-foot social distancing
- Weekly testing for co-curricular activities
- Cleaning and disinfecting, hand-washing and respiratory etiquette, and improved ventilation as defined in this plan.

Outbreak Closure

It typically takes at least one incubation period of 14 days for the impact of implemented mitigation measures to be reflected in the case data. To declare an outbreak over the school administration, in consultation with the school nurse, will monitor weekly for a consistent and sustained reduction in disease transmission over at least 2 incubation periods (28 days). Declaring the outbreak closures is based on case data and other contextual information. Once an outbreak is declared over, an email notification will be sent to all key stakeholders.

If a local health authority determines that a school-wide outbreak of COVID-19 is occurring and is not being adequately mitigated by Learning Bridge Charter School, the applicable local health authority may require the mandatory and immediate use of face coverings for all students and staff in the affected school building(s) and any additional mitigation measures deemed necessary by the local health authority for that school or school building(s). In such an event, the face covering requirement and any other mitigation measures remain in effect until the local health authority determines that the outbreak is closed."

Physical Distancing:

Stay 6 feet away from others

- Inside your home: Avoid close contact with people who are sick, if possible. If possible, maintain 6 feet between the person who is sick and other household members. If you are taking care of someone who is sick, make sure you properly wear a [well-fitting mask](#) and follow other steps to protect yourself.
- Indoors in public: If you are not [up to date on COVID-19 vaccines](#), stay at least 6 feet away from other people, especially if you are at [higher risk of getting very sick](#) with COVID-19.

Physical Distancing To promote full in-person learning, CDC recommends schools maintain at least 3 feet of physical distance between students within classrooms. This reduction from 6 feet of physical distancing should also be combined with universal indoor mask wearing to reduce transmission risk. When it is not possible to maintain a physical distance of at least 3 feet, such as when schools cannot fully reopen while maintaining these distances, it is especially important to layer multiple other prevention strategies, such as universal indoor masking, screening testing, cohorting, improved ventilation, handwashing and covering coughs and sneezes, staying home when sick with symptoms of infectious illness including COVID-19, and regular cleaning to help reduce transmission risk.

Mask use by people who are not fully vaccinated is particularly important when physical distance cannot be maintained. A distance of at least 6 feet is recommended between students and teachers/staff, and between teachers/staff who are not fully vaccinated. COVID-19 Testing Screening testing identifies infected people, including those with or without symptoms (or before development of symptoms) who may be contagious, so that measures can be taken to prevent further transmission.

Learning Bridge will encourage Test to Stay (TTS) it combines [contact tracing](#) and [serial testing](#) (testing that is repeated at least twice during a seven-day period after last close contact with a person with COVID-19) to allow some students, teachers, and staff who would otherwise need to [quarantine](#), do not test positive for COVID-19, and do not have symptoms of COVID-19 to continue in-person learning. This includes people who are a school-associated close contact, are not up to date on their COVID-19 vaccines, do not test positive for SARS-CoV-2, and have no symptoms. TTS participants should get tested at least upon notification of their close contact and again on 5-7 days after their last close contact with someone with COVID-19.

Learning Bridge will encourage students who participate in TTS to properly wear well-fitting masks while in school and should stay home and [isolate](#) if they develop symptoms or test positive for SARS-CoV-2. Schools considering TTS should have robust contact tracing in place and access to testing resources (for example, testing supplies and personnel to conduct testing, or access to an existing community testing site), among other layered prevention strategies. Testing frequency after a close contact can vary (for example, from twice in a seven-day period to daily), but more frequent testing can more quickly identify students who become infected with SARS-CoV-2 and need to [isolate](#).

Learning Bridge will consider TTS as an option for keeping asymptomatic school-associated close contacts in the classroom as an alternative to traditional quarantine at home. Because TTS can be resource intensive, Learning Bride will work with our local health officials. School district administrators and local public

health agencies will make efforts to ensure that such strategies, if offered, are available in an equitable way among students and across schools and comply with all applicable laws, regulations, and policies, including those related to privacy and confidentiality. Administrators will ensure that students who are [isolating](#) or in [quarantine](#) at home have adequate access to remote learning options and that they and their families receive support and follow-up to promote learning and minimize disruption.

In Learning Bridge and K-12 schools, screening testing can help promptly identify and isolate cases, quarantine those who may have been exposed to COVID19 and are not fully vaccinated. CDC guidance provides that people who are fully vaccinated do not need to participate in screening testing. DHHS recommends that testing of all those that are unvaccinated, both staff and students occur at least weekly to be effective.

However, testing is encouraged for parents, students and staff. In schools where testing of all staff and students is not feasible, schools may consider multiple testing strategies, for example, testing a random sample of at least 10% of staff and students who are not fully vaccinated. Weekly testing of those involved in school-based extracurricular activities, including athletics, should occur for those that are not fully vaccinated. Those that should be included in the testing program include student athletes, participants, coaches, trainers, and other people (such as adult volunteers) who are not fully vaccinated and could come into close contact with others during these activities.

Learning Bridge students participating in sporting activities with White Pine school district are tested by the White Pine District for play eligibility and follow their active rules as athletes for White Pine School District.

Any activities with elevated risk such as those that involve singing, shouting, band, and exercise that could lead to increased exhalation should be included. If community transmission reaches transmission level (orange), screening for this group should increase to twice weekly. Once community transmission reaches the high transmission level (red), sports and extracurricular activities should be canceled or held virtually to protect in-person learning, unless all participants are fully vaccinated.

RETURNING TO SCHOOL AFTER ILLNESS:

Learning Bridge intends this for staff, students and parents. It is recommended adherence to the [current CDC guidance on discontinuing isolation](#) and returning to work or school is summarized here for easy reference. Workers in health care settings should follow.

Individuals who test positive for SARS-CoV-2, the virus that causes COVID-19, and who have had symptoms, may return to work or school when:

People who have COVID-19 and have or had [symptoms](#) should isolate for at least 5 days. To calculate the 5-day isolation period, day 0 is the first day of symptoms. Day 1 is the first full day after their symptoms developed.

- They can end isolation after 5 full days if they are fever-free for 24 hours without the use of fever-reducing medication and other symptoms have improved (loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation).

Requiring a negative SARS-CoV-2 test prior to returning to work or school is not recommended. Instead, employers and schools should follow the time- and symptom-

based approach described above in determining when individuals can return to work or school following COVID-19 diagnosis.

Return to work or school guidelines for all individuals or for specific settings Learning Bridge will follow the jurisdiction of Nevada; individuals should also consult with and follow guidance from their local health departments.

If a Student or Staff Member Gets Diagnosed with COVID-19:

If a student or staff member has a positive COVID-19 test or gets diagnosis of presumptive COVID-19 from their health care provider, we will follow these guidelines to decide about return to school:

- Must be fever free a minimum of at least 24 hours without the use of fever reducing medication such as Tylenol, Motrin, Advil, or any fever reducing medication
- Must have improvement in symptoms
- Must stay home at least five days after symptoms first appear
- May be asked to provide documentation from a licensed health care provider stating cleared to return to school

Cleaning and Disinfecting Every Day:

Daily cleaning and disinfecting is usually enough to sufficiently remove potential viruses that may be on surfaces. When Someone is Sick: Close off areas used by the individuals with COVID-19 and wait as long as practical and ideally 24 hours before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. The areas will be cleaned before it is put into use. Open outside doors and windows to increase air circulation in the area. Cleaning staff will clean and disinfect all areas (offices, bathrooms, and common areas) used by the ill persons, focusing especially on frequently touched surfaces (e.g. door knobs, drinking faucets, keyboards, touchscreens, and hallway handrails).

Staff/personnel will ensure that desk surfaces are cleared of items at the end of the day to facilitate janitorial staff's ability to rapidly disinfect surfaces without having to remove student and teachers' possessions. If surfaces are dirty, they will be cleaned using a detergent or soap and water prior to disinfection. Learning Bridge will follow manufacturer's instructions for application and proper ventilation.

Closure of Rooms and School Buildings During outbreaks:

Closure of rooms and school buildings may be necessary to reduce the risk of spread of illness. Rooms are closed based on the need to sanitize and eliminate close contact exposures. If several rooms are affected in a building, the entire building may be closed. If there is substantial risk of spread of contagion or severe illness, the school building may be closed. The requirement to close and the extent and length of closure of a room or school depends on 4150 Technology Way • Carson City, Nevada 89706 775-684-4200 • Fax 775-687-7570 • dphh.nv.gov Created 8.4.2021, updated 2.17.2022 Specific illness and measures that will be taken by Learning Bridge to control the spread of illness and ensure the safety of students, staff, their families, and the community. The following applies:

- Closure of Rooms – For any vomiting or fecal incidents in a classroom or other areas, the classroom or area shall also be closed and sanitized prior to being reoccupied. During outbreaks, rooms may be closed by DHHS or the school district superintendent if cases are linked to room occupancy or if the layout of the room does not allow for adherence to CDC guidelines to control and prevent the spread of infection.

In all cases, rooms must be sanitized following protocol for the specific illness. • Closure of School Buildings – For any infectious disease, a school building may be closed as necessary to control the spread of illness throughout the school site. ***School buildings shall be closed under the following criteria:***

- Directives from the Governor of the State of Nevada, Nevada DHHS, or determinations by the school district superintendent or charter school leader.
- Indeterminate or high risk of school-wide exposures to highly infectious diseases or diseases with high risk of serious illness such as COVID-19, Pertussis, or Norovirus. Schools may also be closed for uncontrolled outbreaks exceeding 30 days. For outbreaks such as COVID-19, levels of school building closure may depend on the ability to occupy the school site at a limited occupancy and ensure the required social distancing is adhered to.

Sanitizing protocols will be implemented in sections of the school that are open during an outbreak. As a supplemental measure to sanitizing affected rooms and areas, increase of airflow is recommended and can be accomplished by opening doors and windows and changing filters in the HVAC system. If a room is closed, change all air filters in that room's HVAC system and if a building is closed, all air filters in the buildings.

The length of closure will be determined by potential exposures as indicated by case reports and contact tracing. During a school building closure, it may be necessary for some staff and students to occupy buildings. Such occupancy is allowable as long as protocols to reduce exposure and spread of illness are being followed. The closure of school buildings will likely be followed by the suspension of athletic events and school gatherings both on and off campus to control for person-to-person spread.

Communication with families and the community is crucial to ensure that they understand the reason for the closure and what is being done to address the outbreak.